

Lafg
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National Stage Processing
Partnership Specialist
7000 305-8427

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO. *09/890342*
FILING DATE *10/17/85*
APPLICANT(S)

10/17/85	CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DER.	IND.	DEP.
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TOTAL IND.	3					
TOTAL DER.	57					
TOTAL CLAIMS	60					

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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PTO/SB/07 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						Application Number <i>09/590-037</i>	Filing Date <i>4/08/02</i>					
						Applicant(s)						
<i>10/12/05</i>						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
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Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

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